

STATE OF HAWAII  
NOTICE OF AND REQUEST FOR EXEMPTION  
FROM CHAPTER 103F, HRS

09 SEP 15 P2:58

To: Chief Procurement Officer

STATE PROCUREMENT OFFICE  
STATE OF HAWAII

From: Department of Human Services/ Vocational Rehabilitation (VR) Division  
*Department/Division/Branch or Office*

Pursuant to § 103F-101(a)(4), HRS, and Chapter 3-141, HAR, the Department requests a procurement exemption to purchase the following:


1. Title and description of health and human service(s): The Assistive Technology Act of 1998, as amended provides support to State efforts to improve the provision of assistive technology to individuals with disabilities through comprehensive statewide programs of technology-related assistance and to provide the State with financial assistance that supports programs designed to maximize the ability of individuals with disabilities and their family members, guardians, advocates, and authorized representatives to obtain assistive technology devices and assistive technology services.  This State Grant for Assistive Technology is 100% federally funded.	
2. Provider Name and Address:	Asistive Technology Resource Centers of Hawaii (ATRC) 414 Kuwili Street, Suite 104 Honolulu, HI 96817
3. Total Contract Funds:	\$877,642
Contract Funds per Year (if applicable):	\$438,821
4. Reference number of Previous Request for this Service (if applicable):	PEH No. 05-07, 06-05, 07-06 and 07-12
5. Term of Contract:	Start: 10/01/09  End: 9/30/11
6. Describe how procurement by competitive means is either not practicable or not advantageous to the State: A transfer of responsibilities to another implementing entity will conflict with the Assistive Technology (AT) State Plan and is expected to disrupt the flow of services to the grant's target beneficiaries - persons with disabilities. Currently, there are no other entity with the expertise, experience and organizational structure and personnel to comply with the AT grant requirements nor have any responded to a Request for Information (RFI) this year calling for potential applicants to provide the AT grant services as required by the AT Act.	
7. Describe the reason for the selection of the provider including a description of how the procedure ensured the maximum fair and open competition practicable: Hawaii's approved Assistive Technology State Plan, for the period 10/01/08 to 9/30/11, has the implementing entity of the AT Act grant as the ATRC of Hawaii in accordance with the AT grant requirements for an implementing entity. ATRC of Hawaii is a non-profit, tax-exempt (501c3) organization with statewide access. Their board is comprised of a majority of individuals with disabilities including its Executive director, as stipulated in the AT Act, requiring the inclusion of individuals with disabilities in substantive roles in the development and implementation of the statewide service delivery system. ATRC's Executive Director, Barbara Fischlowitz-Leong, has been	

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named in the federal grant award notification as the Recipient Project Director from 1997 through 2005. The organization has been the implementing entity of the federal grant for more than 12 years. In 2006, the Assistive Technology (AT) federal grant became a formula grant awarded to states annually that have an approved AT State Plan. ATRC's organization was created and is designed to meet the intent of this AT grant and State Plan.

8. Describe the state agency's internal controls and approval requirements for the exempted procurement:  
The Vocational Rehabilitation (VR) Administrator and Assistant Administrator shall determine whether the requirements of the federal grant have been met.
9. List the state agency personnel, by position title, who will be involved in the approval process and administration of the contract:  
Susan Foard, VR Assistant Administrator
10. Direct questions to (name & position): Guy Tagomori  
Phone number: (808) 692-7729  
e-mail address: gtagomori@dhs.hawaii.gov

I certify that the information provided above is to the best of my knowledge true and correct.

  
\_\_\_\_\_  
Department Head Signature

09/10/09  
\_\_\_\_\_  
Date

LILLIAN B. KOLLER  
\_\_\_\_\_  
Typed Name

**NOTICE**

The chief procurement officer is considering this request for exemption and, if there is good cause, the state intends to exempt the purchase as described in the request. Any inquiries regarding the purchase shall be directed to the contact person noted in item 10 of the request. Any concerns regarding the exemption shall be in writing and received by the chief procurement officer within seven days of the date the notice was first posted. Concerns shall be mailed to: Aaron Fujioka, Chief Procurement Officer, State Procurement Office, 1151 Punchbowl St., #230A, Honolulu, HI 96813.

**FOR CHIEF PROCUREMENT OFFICER USE ONLY**

Chief Procurement Officer's Comments:

☒ APPROVED    ☐ DISAPPROVED    ☐ NO ACTION

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\_\_\_\_\_  
Chief Procurement Officer Signature

9/25/09  
Date

Please ensure adherence to applicable administrative requirements.